ARPA Grant Fund Allocation Committee

Meeting Minutes: 01/10/2022

A meeting for the ARPA Grant Funding Allocation Committee was held on January 10th, 2022 in the Irene Martel Meeting Room at the Town Hall.

Balukonis was absent. Carole Marchand called the meeting to order at 2:04 PM Present from the Committee: Ann Morgan, Carol Cyr, Carole Marchand and Marc Becker. Greg

Action Items

12/29/2021. The vote was unanimous to approve the minutes. 4-0-1 A motion was made by Carol Cyr and seconded by Ann Morgan to approve the minutes from

01/03/2022. The vote was unanimous to approve the minutes 4-0-1 A motion was made by Carole Marchand and seconded by Ann Morgan to approve the minutes from

2. Review grant award paperwork to me mailed

There was no paperwork prepared for review.

Applications

Thai Lemongrass

submit a new one for past bills. Carole Marchand stated that after talking to Daphne that they decided to withdraw this application and

Mama's Kitchen

to approve the grant application. 4-0-1 Carol Cyr made a motion to approve the grant in full. Mama's Kitchen application was reviewed. They are in good standing and included all the paperwork. Marc Becker seconded. The vote was unanimous

was unanimous to adjourn 4-0-1 At 2:25 A motion was made by Ann Morgan and seconded by Carole Marchand to adjourn. The vote

Exhibits

Carole Marchand, Recording Secretary

Date

Mama's Kitchen Application



Town of Webster ARPA Grant Application

Town of Webster
Planning Department

Please complete all sections of this Application including required signatures and requested documentation based on the type of project. Incomplete applications will result in delays.

I. PROJECT TYPE

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Completed Project / Past Expenses

New Project / Future Expenses

require a separate application. Please check one:	Please indicate the type of eligible project. If you plan to apply for multiple projects, each project will
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Business Name
595 S. man St Webster, ma
:
Twice Prenter
Applicant - Name
Q Whitemb St #3 Welster, Mil
508-335-2979 Mamas Kitchen 595/0) Grown L. Com
Applicant - Daytime Phone Number Applicant - Email Address
Required - Applicant is (Check)
□ Property Owner □ Business Owner / Commercial Tenant □ Non-Profit Organization
Required - Federal Tax ID (FEIN)# or AG # <u>83-3765 756</u>
GENERAL PROPERTY INFORMATION (To be completed by ALL Applicants)
ST 6166 Resity UCC
Property Owner (Name of Individual/Corporation/Trust that owns the property)
Property Owner Mailing Address
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Property Owner Phone Number

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BUSINESS/ORGANIZATION INFORMATION Business/organization has operated at current location for how long? Provide a brief description of business: Mariness Kut Mariness Mariness
maines Kitania in a family operated
Destaurant some the committy home contex
megk from breakfast to seminar
Has your business/organization been negatively impacted economically by the COVID-19 public health emergency? Please provide a brief explanation of how your business has been impacted.
The business was negatively impacted the to loss
of customers the to Coult restrictions and manget

V. SCOPE OF SERVICES / TIMELINE

project includes capital improvements, please specify the exact work items to be included in the project. Please include a brief description of the project that will be completed with the grant funds. If the

	lease provide a brief timeline of the proposed project.	THE SALE AND THE STREET PROPERTY OF THE SALE AND ADDRESS AND ADDRE	15/170 Montage gr	of will help he pay being such the to cont. Such as
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How the project will improve the economic climate in the Town of Webster?

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Town of Webster, MA ARPA Grant Application

VI. FUNDING REQUEST

along with completed worksheet (page 8) are required. for three (3) quotes. If you are requesting funding for payments in arears, copies of past due invoices, Your request should be based on actual, expected expenses. You are required to provide documentation

How much are you requesting from ARPA Grant Funds (\$25,000 maximum*)? 40.5What is the total cost of the project to be completed?

VII. REQUIRED SIGNATURES

I certify that all information provided in this application true and accurate to the best of my knowledge and that, if approved, I will complete the project/use as approved by the Town of Webster and the ARPA Grant Program Allocation Committee.

I have read the program information and understand my obligations to the program as outlined.

Upon notification that my project has been accepted, I will sign a preliminary agreement authorizing the requirements. Town of Webster to encumber funds for my project and stipulating that I will abide by all program

Applicant Signature* 130% Date

Town of Webster Treasurer / Collector

Date

If the Applicant is not the Owner of the property in which the business is located, a signed letter by the Property Owner must be submitted with this application.

Town of Webster, NA ARPA Grant Application

PAST EXPENSES - GRANT FUNDS REQUESTED

invoices for products or services received AFTER March 3, 2021 may be eligible. stabilize the business) or for personal protection modifications or equipment due to COVID-19. Past due ARPA funds can be used for working capital (rent/mortgage, insurance, utilities, technical assistance, etc. to

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Rent/Mortgage Monthly: $$1,046.33$ x#Months: 9 =Total: $$9,4/6$	x#Months:	=Total: \$	0 W C
Utilities (Average Monthly: \$ うょくしゃめ。 x # Months: 1 = Total: \$ らくりりつ	x#Months:	= Total: \$_	10. 310. G
Insurance (Monthly):	x # Months:	= Total· ♦	

Submit with your application copies of the invoices you wish to use grant funds to pay. For rent or mortgage due notices or letter from the owner of the property you rent showing the amount provide invoices. payments, submit either a copy of your most recent mortgage statement showing the arrearage, or past-

FUTURE EXPENSES - GRANT FUNDS REQUESTED

expenses AFTER March 3, 2021 and through December 31, 2024 may be eligible. stabilize the business) or for personal protection modifications or equipment due to COVID-19. ARPA funds can be used for working capital (rent/mortgage, insurance, utilities, technical assistance, etc. to Future

(Note: you will be asked to document these items)

Describe uses of requested funds:

Insurance (Monthly): \$	Utilities (Average Monthly: \$	Rent/Mortgage Monthly: \$
x # Months:		x # Months:
x # Months: = Total: \$	x # Months: = Total: \$	x # Months: = Total: \$